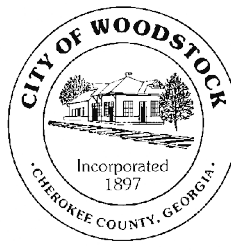


City of Woodstock

Attn: Utility Billing
12453 Hwy 92
Woodstock, GA 30188



770-592-6006
678-388-6352 (Fax)

h2o@woodstockga.gov
www.woodstockga.gov

SERVICE ADDRESS/ACCOUNT#

☐ CONNECT or ☐ DISCONNECT my service on: _____
DATE

WATER SERVICE IS CURRENTLY: _____ ON _____ OFF

CUSTOMER INFORMATION

(Please Print Legibly)

☐ Rent ☐ Homeowner ☐ Landlord ☐ Builder

If renting, give owners' name and phone number: _____

Applicant Name: _____

Business Name (If Applicable) _____

Do you want this Account under your Business name? ____Y ____N

MAILING/FORWARDING ADDRESS: _____

City, State, Zip: _____

Day Phone: _____ Evening Phone: _____

Cell Phone: _____

(If Business) Name of Responsible Party: _____

SSN#: _____ DR LIC#/STATE: _____

Employer: _____ Employed: ____Yrs ____Mos

Address: _____

Title: _____ Phone#: _____

Spouse Name: _____

Employer: _____ Employed: ____Yrs ____Mos

Work Phone: _____ Cell#: _____

Emergency Contact: _____ Phone#: _____

****To receive your invoice by email, please provide your email address here. You will not receive a paper statement. Notify us of changes immediately as needed.****

APPLICANT SIGNATURE: _____

Date: _____

IMPORTANT CUSTOMER INFORMATION

→DEPOSIT: Owner \$100.00,
Renter/Lessee \$125.00,
Business \$250.00+

→Someone must be home for
water service to be re-
stored or a signed WAIVER
must be provided at the
time of application.

→Emergency, after hours, or
missed appointments will
be charged an additional
fee.

→Personal checks will not be
accepted if your service is
disconnected for non-
payment. Balance must be
paid in full, in order to
reconnect service.

FOR OFFICE USE ONLY:

Previous Read: _____

New Read: _____

Work Order #: _____

PAYMENT INFORMATION:

\$ _____ DEPOSIT

\$ _____ WATER TAP

\$ _____ SEWER TAP

\$ _____ TOTAL PAID

____ CASH
____ CHECK#(____)
____ C/C
____ OTHER

CASHIER _____

DATE PAID _____